Mighty Corson Art Players
[title of show]

Audition Form

Show Dates: April 19 - 28

| Name |  | Address |  |
| --- | --- | --- | --- |
| Age |  | Email |  |
| Height |  | Cell Phone |  |
| Vocal Range |  | Home Phone |  |
| Role(s) auditioning for? |  | Are you comfortable with stage intimacy? | Please circle one:YES NO |
| Would you accept any role?Would you accept an understudy role? | Please circle one:YES NOYES NO | Please circle if you would be willing to do any of the following. | CUT HAIR SHAVE FACIAL HAIRDYE HAIR |

## Experience Conflicts

| Production | Role | Date |  | Please list conflicts here and on the back.  |
| --- | --- | --- | --- | --- |
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*I understand that rehearsal is for the benefit of all involved and will be respectful of the cast and crew by being prompt and ready to go at rehearsal start. Except in case of emergency, I will notify the director or stage manager at least 24 hours ahead of an unplanned absence from rehearsal.*

Signature Date